

IAD022384200  
FACILITY NAME: WARNER IMPLEMENT INC  
LOCATION: 72 BUS BROWN DR  
RCRA ID #: WOODBINE-IA-51579

07 19/94

IMPACT OF FLOOD AND RAIN QUESTIONNAIRE  
RCRA PROGRAM

1. Is this facility located within approximately 1/2 mile of a river, creek or stream? YES or NO? If YES, what is the name if known? SMALL CREEK

2. Are there any visual signs that the facility was affected by flood waters? YES or NO? If YES, describe: \_\_\_\_\_

3. Was the facility damaged by the flood water or rain? YES or NO? If YES, generally describe the damage. EQUIPMENT: PARTS  
DAMAGED. PARTS WASHERS: USED OIL TANK: ANTI FREEZE DRUMS  
SIT. HIGH ENOUGH - WERE NOT DAMAGED. NO RELEASES. SOME PAPERS/FILES DAMAGED

IF THE ANSWER TO QUESTION #3 IS NO, STOP HERE.

4. Was there any damage to inventories, products or waste at the facility that would have caused the facility to generate hazardous waste? YES or NO?

5. Were there any release of hazardous material as a result of the flooding? YES or NO? If yes, describe: \_\_\_\_\_

6. If the answer to question #5 is YES, has remedial activity occurred to address the releases? YES or NO? If YES, describe: \_\_\_\_\_

7. Were there any circumstances (e.g. design criteria) or actions that the facility took that were useful in preventing potential releases or generation of hazardous materials? YES or NO? For the purpose of this question, we are looking for the "lessons learned" that may be useful in future guidance, etc. If YES, describe: \_\_\_\_\_



R00412152

RCRA RECORDS CENTER

FACILITY NAME: \_\_\_\_\_  
LOCATION: \_\_\_\_\_  
RCRA ID #: \_\_\_\_\_

IF THE ANSWER TO QUESTION #4 IS NO, STOP HERE.

8. Is the facility currently storing hazardous waste generated as a result of the flood? YES or NO? Is the storage area located inside or outside or both? INSIDE (I), OUTSIDE (O) or BOTH (B)? Describe the type and amount of hazardous waste in storage.

TYPE	AMOUNT	I, O or B
Examples:		
Contaminated MEK	2 - 55 gal. Drums	O (Outside)
Cleaning Products	6 spray bottles	I (Inside)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. Did the facility generate hazardous waste as a result of the flood that was subsequently sent off-site? YES or NO? Describe the type and amount of hazardous waste generated.

TYPE	AMOUNT
Examples:	
Contaminated MEK	2 - 55 gal. Drums
Cleaning Products	6 spray bottles

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

OTHER COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Last Revised: 1/25/91

Time to complete screening: 35 min

**RCRA SCREENING CHECKLIST**

Inspector: J. Cull

Primary Media:

Date: 07/19/94

IAD022384200

Facility:

WARNER IMPLEMENT INC

Facility Address: 72

BUS BROWN DR

WOODBINE-IA-51579

Phone ( 712 ) 647-2702

Contact/Title: Gary Warner ~~owner~~ Vice President

SIC #:                      Process: Sales / Service of Farm Equipment

**Office Questions:**-----

1) Facility description 4 acres, 3 buildings

2) Does facility have an EPA ID number? Yes ☒ No ☐ #                     

3) What Chemical and/or Industrial Waste (CIW) streams are generated? (list: Name, Amount generated/month, Final disposition) used oil filters, rate unknown, drain: put w/garbage to landfill

used oil, 75-100 gal/mo, Capital oil

parts washers (each hold 30 gal.) 45 gal. /mo, S-K

waste antifreeze, rate unknown, S-K

4) Does the facility classify any of their CIW's as hazardous waste (HW)? Yes ☒ (please note which ones are classified as HW)

No parts washers (DOT, DOTB, DOT9)

5) Does the facility conduct any of the following on-site activities: Treatment/Recycling/Burning/Open Dumping /Landfills/Surface Impoundments? Describe: No

**Field Observations:**-----

6) Are CIW/HW stored on-site? Yes ☒ No ☐

Describe (material, approximate quantity, storage method):

used oil, 100 gal, 300 gal; 3 Parts Washers w/ 30 gallon capacity;

waste antifreeze, 70 gal, 55-gallon drums

7) Describe condition of storage containers/tanks (open, damaged, unlabeled, leaking, etc.): All drums and tanks closed and in sound condition; No exposed solvent in parts washers

8) Are incompatible wastes stored together (acids, bases, solvents, cyanides)? Yes ☐ No ☒ Describe:                     

9) Are there any signs of past spills/releases (dead or stressed vegetation, ground discoloration, stains)? Yes ☐ No ☒ Describe                     

10) Do any of the on-site Chemical and/or CIW/HW management practices concern you? Yes ☐ No ☒ Describe:                     

11) Recommendations and/or Additional Observations: none

Just  
this  
page



**WARNER IMPLEMENT INC.**  
**Woodbine, Iowa**



**Photo No.:** 1 **Direction:** Southwest **Photographer:** Jami Cull  
**Date/Time:** 07/19/94; 10:20 **Description:** The photograph shows the front of the facility.

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777 Big Timber Road  
Elgin, Illinois 60123

DUNS NO. 05106-0408

FOR SERVICE CALL  
TRANSPORTER

FED. ID NO. 39-6090019

402-333-6321 CHUCK WEBER

LDR REQ'D

220-2200 67

SCHEDULED SERVICE WEEK	SCHEDULED SERVICE TERRITORY	REFERENCE NUMBER
93- 2	02	688143
MANIFEST NUMBER	88143	

5-127-01-8608-7

WARNER IMPLEMENT

BUS BROWN DRIVE

BOX 12

WOODBINE

1A 51 579

B I L L T O

MANIFEST  
NUMBER

88143

SERVICE DATE		SALESMAN'S NO.		SALES SPECIALIST		SALES TAX EXEMPTION NUMBER		HANDLING CODE		CREDIT CODE		PREVIOUS BALANCE		PORTION OVER 60 DAYS	
1-12-93		7031		XXXX						C					
BUSINESS TYPE	CHAIN	CUSTOMER P.O. NUMBER		GENERATOR/CUSTOMER PHONE #				O.C.	SVC P/S	PROD. P/S	SERVICE TAX		C.O.M.S. TAX		PRODUCT TAX
08	NO	007		712-647-2702				NO	813	001	.05		.05		.05

## MACHINE SERVICE SECTION

## MACHINE INSPECTION SECTION

MACHINE NUMBER	SERVICE CHARGE	SALES TAX	TOTAL CHARGE	SERVICE TERM	CHANGE SERVICE TERM		CHANGE SCHEDULE DATE (YY WW)	REMARKS	PLEASE CHECK APPROPRIATE BOXES		
					(WEEKS)	(INITIAL)			GOOD	POOR	
141-26718	48.50	2.43	50.93	08					MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>
300-03043	83.00	4.15	87.15	08					LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>
303-77024	83.00	4.15	87.15	08						YES	NO
530-89487	99.00	4.95	103.95	08					DECALS IN PLACE AND LEGIBLE	<input type="checkbox"/>	<input type="checkbox"/>
									FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>
									EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>
									MACHINE PROPERLY GROUNDED	<input type="checkbox"/>	<input type="checkbox"/>
									LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
									SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>

**TOTAL  
SERVICE SECTION**

GENERATOR USA EPA ID NO.

GENERATOR STATE ID NO.

16-210-9192

## HAZARDOUS WASTE INFORMATION:

"This is to certify that the below-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

I certify that my total waste streams are within one of the following categories:

[illegible]

Total Quantity = Number of Drums x Ave. Wt/Drum of: Pails 4 x 5, SSPW XXXXX, 16 Gal. 7, 30 Gal. XXXXXXXXXX

DESIGNATED FACILITY NAME AND ADDRESS: SAFETY-KLEEN CORP.

3515 SO 139TH ST

ОМА НА

NE 68144

USA EPA ID NO. NE0981495724

STATE ID NO

## PRODUCT SALES SECTION

[illegible]

## PAYMENT RECEIVED SECTION

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER	<input type="checkbox"/> TODAYS SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INV. # _____	AMOUNT \$ _____	
INV. # _____	AMOUNT \$ _____	
INV. # _____	AMOUNT \$ _____	

### TOTAL PRODUCT AMOUNTS

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED. THE PAYMENT RECEIVED SECTION ALSO HAVE NOTED THE CHINE INSPECTION SECTION ABOVE AND THE PRESENCE OF MACHINE SOLVENT AND RECLAMATION AGREEMENT INFORMATION ON THE REVERSE SIDE. THE ABOVE AMOUNT IS SUBJECT TO AN INTEREST CHARGE OF THE LESSOR OF 1 1/2% PER MONTH (18% PER ANNUM) OR THE MAXIMUM RATE ALLOWED BY LAW. ALL PAID INVOICES THAT ARE NOT PAID WITHIN 30 DAYS

**X** Paul V. Heubler  
GENERATOR/DESIGNATED REPRESENTATIVE SIGNATURE

Print  
Name

**TOTAL SERVICE AMOUNT  
(FROM ABOVE)**

**TOTAL DUE**

IN THE EVENT OF DEFAULT, SAFETY-KLEEN SHALL BE ENTITLED TO RECOVER COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES.

**IN EVENT OF EMERGENCY CALL  
1-708-888-4660 (24 hours)**

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

6



SAFETY-KLEEN CORP.  
(DESIGNATED FACILITY)

EPA ID NO. NED981495724  
(DESIGNATED FACILITY)

3515 SO 139TH ST

DRESS: OMAHA

NE 68144

### OPTION A

Under manifest number 688143, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

### OPTION B

FOR CUSTOMERS ONLY  
(PARTS WASHER AND  
IMMERSION CLEANER  
609 AND 699)

In accordance with 40 CFR 268.7, the generator hereby provides notice that the waste is restricted from land disposal. I am a small quantity generator (100-1,000 kg/mo) in accordance with 40 CFR 268.7. This notice applies to all waste shipments under my service contract with Safety-Kleen Corp. It covers today's shipment on manifest No. \_\_\_\_\_, or sales/service acknowledgement No. \_\_\_\_\_, and all subsequent shipments. A copy of this notice will be maintained with the service contract(s) or sales/service acknowledgement(s) for five (5) years beyond the termination of the service contract.

WASTE NAME	EPA * WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD (FOR NON-WASTE WATER)
<input checked="" type="checkbox"/> Waste Petroleum Naphtha (105 - Mineral Spirits)	D001, D018, D039,	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's) $\geq$ 1000 mg/l Benzene Tetrachloroethylene	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGs) (40 CFR 268.42) (non-waste water) INCIN (40 CFR 268.42) (non-waste water) Not Established Not Established
<input type="checkbox"/> Waste Petroleum Naphtha (140 - Mineral Spirits)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGs (40 CFR 268.42) (non-waste water)
<input type="checkbox"/> Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001, D006, D007, D008, D039,	All of the above, plus: — Cadmium — Chromium — Lead — Tetrachloroethylene	1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established
<input type="checkbox"/> Waste Compound Cleaning Liquid/ Immersion cleaner 609	F004, F002, F002, D006, D007, D008, D022,	Cresylic Acid 1, 2-dichlorobenzene Methylene chloride — Cadmium — Chromium — Lead — Chloroform	3.2 (non-waste water) 6.2 (non-waste water) 33.0 (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established
<input type="checkbox"/> Waste Compound Cleaning Liquid/ Immersion Cleaner 699	D006, D007, D008, D018, D021, D027, D039, D040,	HOC's $\geq$ 1000 mg/l — Cadmium — Chromium — Lead — Benzene — Chlorobenzene — 1, 4-Dichlorobenzene — Tetrachloroethylene — Trichloroethylene	INCIN (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established Not Established Not Established Not Established Not Established
<input type="checkbox"/> Waste Perchloroethylene	F002,	Tetrachloroethylene	5.6 (non-waste water)
<input type="checkbox"/> Waste Trichlorotrifluoroethane	F002,	Trichlorotrifluoroethane	28.0 (non-waste water)
<input type="checkbox"/> Waste 1,1,1 Trichloroethane	F002,	1, 1, 1 Trichloroethane	5.6 (non-waste water)
<input type="checkbox"/> Waste Petroleum Naphtha (Dry Cleaning)	D001, D039,	Ignitable Liquid (High TOC Subcategory) Tetrachloroethylene	INCIN, FSUBS, or RORGs (40 CFR 268.42) (non-waste water) Not Established
<input type="checkbox"/> Waste Paint Related Material	F003, F005, F003, F005, F003, F003, D001, D006, D007, D008,	Acetone Methyl Ethyl Ketone Methyl Isobutyl Ketone Toluene Xylene Methanol Ignitable Liquid (High TOC Subcategory) Cadmium Chromium Lead (TOC Subcategory)	160.0 (non-waste water) 36.0 (non-waste water) 33.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 0.75 (non-waste water) INCIN, FSUBS, or RORGs (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water)
<input type="checkbox"/> Waste Antifreeze	D008, D039,	Lead Tetrachloroethylene	5.0 (non-waste water) Not Established

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

\* These treatment standards do not preclude reclamation prior to final disposition. 9302 5-127-01-8608 02 688143  
IAD022384200

Generator Company:

EPA ID NO.:

MANF DOC: 88143

Generator's Signature

*Paul Theulen*

Date:

1-12-93

Printed Name and Title of Generator:

Paul Theulen PARTS Dept

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restrictions.



**777 Big Timber Road**  
**Elgin, Illinois 60123**  
**5-127-01-8608-7**  
**WARNER IMPLEMENT**  
**BUS BROWN DRIVE**  
**BOX 12**  
**WOODBINE**



FOR SERVICE CALL  
TRANSPORTER

402-333-0321 CHUCK WEBER  
LDR REQ'D 220-2200 GP

DUNS NO. 05106-0408 FED. ID NO. 39-6090019

SCHEDULED SERVICE WEEK	SCHEDULED SERVICE TERRITORY	REFERENCE NUMBER
93- 10	02	335453
MANIFEST NUMBER	35453	

SERVICE DATE		SALESMAN'S NO.	SALES SPECIALIST	SALES TAX EXEMPTION NUMBER		HANDLING CODE	CREDIT CODE			PREVIOUS BALANCE	PORTION OVER 60 DAYS
3-10-93		7031	XXXX				C				
BUSINESS TYPE	CHAIN	CUSTOMER P.O. NUMBER		GENERATOR/CUSTOMER PHONE #		O.C.	SVC P/S	PROD. P/S	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
08	NO	007		712-647-2704		NO	813	001	.05	.05	.05

MACHINE SERVICE SECTION								MACHINE INSPECTION SECTION			
MACHINE NUMBER	SERVICE CHARGE	SALES TAX	TOTAL CHARGE	SERVICE TERM	CHANGE SERVICE TERM (WEEKS) (INITIAL)	CHANGE SCHEDULE DATE (YY WW)	REMARKS 0000	PLEASE CHECK APPROPRIATE BOXES			
141-26718	48.50	2.43	50.93	08				MACHINE CONDITION & CLEANLINESS	GOOD		POOR
300-03043	83.00	4.15	87.15	08					<input checked="" type="checkbox"/>		<input type="checkbox"/>
303-77024	83.00	4.15	87.15	08				LAMP ASSEMBLY CONDITION	<input type="checkbox"/>		<input type="checkbox"/>
530-89487	99.00	4.95	103.95	08				DECALS IN PLACE AND LEGIBLE	YES		NO
									<input type="checkbox"/>		<input type="checkbox"/>
								FUSIBLE LINK INSTALLED	<input type="checkbox"/>		<input type="checkbox"/>
								EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>		<input type="checkbox"/>
								MACHINE PROPERLY GROUNDED	<input type="checkbox"/>		<input type="checkbox"/>
								LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>		<input type="checkbox"/>
								SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>		<input type="checkbox"/>
TOTAL SERVICE SECTION			313.60	15.65	329.25	GENERATOR USA EPA ID NO. 1A0022384200		GENERATOR STATE ID NO. 16-210-9192			

HAZARDOUS WASTE INFORMATION:					*This is to certify that the below-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.	I certify that my total waste streams are within one of the following categories:
CONTAINERS					US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	USEPA TRANSPORTER ID# ILD051060408
PAILS NO. DM	SSPW TANKS OF	18 GAL. NO. DM	30 GAL. NO. DM	TOTAL LBS. OR GAL.		0 to 220 lbs./month
	1	1	3	67	Waste Combustible Liquid, N.O.S. (Mineral Spirits) NA1993 PGIII (EPA, D001, D018, D039) (ERG #27) (IN GALLONS)	220 lbs. to 2,200 lbs./month
					RQ Waste Compounds, Cleaning Liquid, (Monoethanolamine) 8, NA1760 PGIII (EPA, D006, D007, D008, D018, D021, D027, D039, D040) (ERG #80)	Greater than 2,200 lbs./month
					PRODUCT NO. 699	
Total Quantity = Number of Drums x Ave. Wt/Drum of: Pails					5.0 XXXXXXXX	6 XXXXXXXXXXXXX
DESIGNATED FACILITY NAME AND ADDRESS:					SAFETY-KLEEN CORP.	USA EPA ID NO. NE0981495724
3515 SO 139TH ST					OMAHA NE 68144	STATE ID NO.

PRODUCT SALES SECTION											
SOLD ON PREVIOUS SERVICES			PRODUCT NUMBER	DESCRIPTION	MSDS GIVEN	PRICE	U/M	QUANTITY DELIVERED	SALES AMOUNT	TAX	LINE TOTAL
2 PRIOR	PRIOR	LAST									
	1		016	HOSE, FLEX-THRU DRU	<input type="checkbox"/>	3.45	EA				
					<input type="checkbox"/>						
					<input type="checkbox"/>						
					<input type="checkbox"/>						
					<input type="checkbox"/>						
					<input type="checkbox"/>						
					<input type="checkbox"/>						
					<input type="checkbox"/>						
					<input type="checkbox"/>						

PAYMENT RECEIVED SECTION		
CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
		<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INV. #	AMOUNT \$	
INV. #	AMOUNT \$	
INV. #	AMOUNT \$	

TOTAL PRODUCT AMOUNTS			
CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. ALSO I HAVE NOTED THE MACHINE INSPECTION SECTION ABOVE AND THE PRESENCE OF MACHINE, SOLVENT AND RECLAMATION AGREEMENT INFORMATION ON THE REVERSE SIDE. THE ABOVE AMOUNT IS SUBJECT TO AN INTEREST CHARGE OF THE LESSOR OF 1 1/2% PER MONTH (18% PER ANNUM) OR THE MAXIMUM RATE ALLOWED BY LAW ON ANY UNPAID INVOICES THAT ARE NOT PAID WITHIN 30 DAYS.		TOTAL SERVICE AMOUNT (FROM ABOVE)	329.18
X <i>Paul Thewissen</i>		TOTAL DUE	329.18
GENERATOR/DESIGNATED REPRESENTATIVE SIGNATURE		IN THE EVENT OF DEFAULT, SAFETY-KLEEN SHALL BE ENTITLED TO RECOVER COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES.	
Print Name <i>Paul Thewissen</i>			

IN EVENT OF EMERGENCY CALL  
1-708-888-4660 (24 hours)

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

Print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-94

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

IA 022384200

Manifest Document No.

35493

2. Page 1  
of 1Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

WARNER IMPLEMENT

BOX 12

WOODBRINE

BUS BROWN DRIVE

IA 51579

4. Generator's Phone ( 712 ) 647-2702

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name

SAFETY-KLEEN CORP.

6. US EPA ID Number

ILD 051060408

C. State Transporter's ID

D. Transporter's Phone 402 333-6321

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

SAFETY-KLEEN CORP.

3515 90 139TH ST

OMAHA

NE 68144

10. US EPA ID Number

5-127-01

NEED 981495724

G. State Facility's ID

H. Facility's Phone

402 333-6321

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

HM

12. Containers  
No. Type13. Total  
Quantity14. Unit  
Wt/Vol

15. Waste No.

a. X WASTE COMBUSTIBLE LIQUID, N.O.S.  
(PETROLEUM NAPHTHA) NA1993 PGLIII (0001)  
(ERG#27)

4

DM

56

G

D001

D039

b. X WASTE COMBUSTIBLE LIQUID, N.O.S.  
(PETROLEUM NAPHTHA) NA1993 PGLIII (0001)  
(ERG#27)

1

DF

5

G

D001

D039

c.

d.

J. Additional Descriptions for Materials Listed Above

I(A) D018

I(B) D018

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information 9310 51355980 335453 5-127-01-8608 02

IF UNDELIVERABLE, RETURN TO GENERATOR FOR RECYCLE

EMERGENCY RESPONSE#708-888-4660 24HR.

SKDOT# A: 501 B: 501 C: D:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

PAUL Theuton

Signature

Paul Theuton

Date

Month Day Year  
03 10 93

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

EUGENE Rausch

Signature

Eugene Rausch

Date

Month Day Year  
3 10 93

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Tricia Brewer

Signature

Tricia Brewer

Month Day Year

3 11 93

SAFETY-KLEEN CORP.  
(DESIGNATED FACILITY)EPA ID NO. NED 981495724  
(DESIGNATED FACILITY)

3515 SO 139TH ST

ADDRESS: OMAHA

NE 68144

## OPTION A

Under manifest number 35453, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

## OPTION B

SOG CUSTOMERS ONLY  
(PARTS WASHER AND  
IMMERSION CLEANER  
609 AND 699)

In accordance with 40 CFR 268.7, the generator hereby provides notice that the waste is restricted from land disposal. I am a small quantity generator (100-1,000 kg/mo) in accordance with 40 CFR 268.7. This notice applies to all waste shipments under my service contract with Safety-Kleen Corp. It covers today's shipment on manifest No. \_\_\_\_\_, or sales/service acknowledgement No. \_\_\_\_\_, and all subsequent shipments. A copy of this notice will be maintained with the service contract(s) or sales/service acknowledgment(s) for five (5) years beyond the termination of the service contract.

PLEASE CHECK THE APPROPRIATE BOXES	WASTE NAME	EPA * WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD (FOR NON-WASTE WATER)
	<input checked="" type="checkbox"/> Waste Petroleum Naphtha (105)	D001,	Ignitable Liquid (High TOC Subcategory)	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water)
		D018,	Benzene	INCIN (40 CFR 268.42) (non-waste water)
		D039,	Tetrachloroethylene	Not Established
	<input type="checkbox"/> Waste Petroleum Naphtha (140)	D001,	Ignitable Liquid (High TOC Subcategory)	Not Established
	<input type="checkbox"/> Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001, D006, D007, D008, D039,	All of the above, plus: — Cadmium — Chromium — Lead — Tetrachloroethylene	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water)
				1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established
	<input type="checkbox"/> Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006, D007, D008, D018, D021, D027, D039, D040,	HOC's $\geq$ 1000 mg/l — Cadmium — Chromium — Lead — Benzene — Chlorobenzene — 1, 4-Dichlorobenzene — Tetrachloroethylene — Trichloroethylene	INCIN (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established Not Established Not Established Not Established
	<input type="checkbox"/> Waste Perchloroethylene	F002,	Tetrachloroethylene	5.6 (non-waste water)
	<input type="checkbox"/> Waste Perc. Filters This hazardous debris is subject to the alternative treatment standards of 40CFR 268.45.	F002,	Tetrachloroethylene	5.6 (non-waste water)
	<input type="checkbox"/> Waste Trichlorotrifluoroethane	F002,	Trichlorotrifluoroethane	28.0 (non-waste water)
	<input type="checkbox"/> Waste 1,1,1 Trichloroethane	F002,	1, 1, 1 Trichloroethane	5.6 (non-waste water)
	<input type="checkbox"/> Waste Petroleum Naphtha (Dry Cleaning)	D001, D039,	Ignitable Liquid (High TOC Subcategory) Tetrachloroethylene	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) Not Established
	<input type="checkbox"/> Waste Paint Related Material	F003, F005, F003, F005, F003, F003, F003, D001, D006, D007, D008,	Acetone Methyl Ethyl Ketone Methyl Isobutyl Ketone Toluene Xylene Methanol Ignitable Liquid (High TOC Subcategory) Cadmium Chromium Lead (TOC Subcategory)	160.0 (non-waste water) 36.0 (non-waste water) 33.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 0.75 (non-waste water) INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water)
	<input type="checkbox"/> Waste Antifreeze	D008, D039,	Lead Tetrachloroethylene	5.0 (non-waste water) Not Established

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

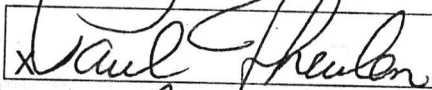
\*These treatment standards do not preclude reclamation prior to final disposition.

9310 5-127-01-8608 02 335453  
IAD022384200

Generator Company: WARNER IMPLEMENT

EPA ID NO.:  
MANF DOC: 35453

Generator's Signature:



Date: 03-10-93

Printed Name and Title of Generator:

Paul Theulen Parts Dept





Print or type. (Form designed for use on elite (12-pitch) typewriter.)

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

IA0 022384200

Manifest Document No.

94589

2. Page 1  
of 1Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

WARNER IMPLEMENT

BOX 12

WOODBINE

BUS BROWN DRIVE

IA 51579

4. Generator's Phone (712) 647-2702

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name

SAFETY-KLEEN CORP.

6. US EPA ID Number

ILD 051060408

C. State Transporter's ID

D. Transporter's Phone 402 333-6321

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

SAFETY-KLEEN CORP.

3515 SO 139TH ST

OMAHA

NE 68144

10. US EPA ID Number

S-127-01

NEB 981495724

G. State Facility's ID

H. Facility's Phone

402 333-6321

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

HM

a.

X

WASTE COMBUSTIBLE LIQUID, N.O.S.  
(PETROLEUM NAPHTHA) NA1993 PGIII (D001)  
(ERGN27)12. Containers  
No. Type

4

DM

13. Total  
Quantity

56

14. Unit  
Wt/Vol

G

1. Waste No.

0001

0039

b.

X

WASTE COMBUSTIBLE LIQUID, N.O.S.  
(PETROLEUM NAPHTHA) NA1993 PGIII (D001)  
(ERGN27)

1 OF

5

G

0001

0039

c.

d.

J. Additional Descriptions for Materials Listed Above

1(A) D018  
1(B) D018

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information 0318 33597928 994589 S-127-01-8608 02

IF UNDELIVERABLE, RETURN TO GENERATOR FOR RECYCLE  
EMERGENCY RESPONSE 1-800-888-4600 24HR.

SKOCTH A: 501 B: 501 C: D:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Date

Month Day Year

Date

Month Day Year

Date

Month Day Year

19. Discrepancy Indication Space

Line 13 total quantity should be 56.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Date

Month Day Year

SAFETY-KLEEN CORP.

5-127-01

NOTICE OF LAND DISPOSAL

RESTRICTION OF WASTE

SAFETY-KLEEN CORP.  
(DESIGNATED FACILITY)EPA ID NO. NED981495724  
(DESIGNATED FACILITY)

3515 SO 139TH ST

ADDRESS: OMAHA

NE 68144

## OPTION A

Under manifest number 94589, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

## OPTION B

SOQ CUSTOMERS ONLY  
PARTS WASHER AND  
IMMERSION CLEANER  
609 AND 699

In accordance with 40 CFR 268.7, the generator hereby provides notice that the waste is restricted from land disposal. I am a small quantity generator (100-1,000 kg/mo) in accordance with 40 CFR 268.7. This notice applies to all waste shipments under my service contract with Safety-Kleen Corp. It covers today's shipment on manifest No. \_\_\_\_\_, or sales/service acknowledgment No. \_\_\_\_\_, and all subsequent shipments. A copy of this notice will be maintained with the service contract(s) or sales/service acknowledgment(s) for five (5) years beyond the termination of the service contract.

WASTE NAME	EPA * WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD (FOR NON-WASTE WATER)
<input checked="" type="checkbox"/> Waste Petroleum Naphtha (105)	D001, D018, D039,	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's) $\geq$ 1000 mg/l Benzene Tetrachloroethylene	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water) INCIN (40 CFR 268.42) (non-waste water) Not Established Not Established
<input type="checkbox"/> Waste Petroleum Naphtha (140)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water)
<input type="checkbox"/> Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001, D006, D007, D008, D039,	All of the above, plus: — Cadmium — Chromium — Lead — Tetrachloroethylene	1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established
<input type="checkbox"/> Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006, D007, D008, D018, D021, D027, D039, D040,	HOC's $\geq$ 1000 mg/l — Cadmium — Chromium — Lead — Benzene — Chlorobenzene — 1, 4-Dichlorobenzene — Tetrachloroethylene — Trichloroethylene	INCIN (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established Not Established Not Established Not Established
<input type="checkbox"/> Waste Perchloroethylene	F002,	Tetrachloroethylene	5.6 (non-waste water)
<input type="checkbox"/> Waste Perc. Filters This hazardous debris is subject to the alternative treatment standards of 40CFR 268.45.	F002,	Tetrachloroethylene	5.6 (non-waste water)
<input type="checkbox"/> Waste Trichlorotrifluoroethane	F002,	Trichlorotrifluoroethane	28.0 (non-waste water)
<input type="checkbox"/> Waste 1,1,1 Trichloroethane	F002,	1, 1, 1 Trichloroethane	5.6 (non-waste water)
<input type="checkbox"/> Waste Petroleum Naphtha (Dry Cleaning)	D001, D039,	Ignitable Liquid (High TOC Subcategory) Tetrachloroethylene	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) Not Established
<input type="checkbox"/> Waste Paint Related Material	F003, F005, F003, F005, F003, F003, F003, D001, D006, D007, D008,	Acetone Methyl Ethyl Ketone Methyl Isobutyl Ketone Toluene Xylene Methanol Ignitable Liquid (High TOC Subcategory) Cadmium Chromium Lead (TOC Subcategory)	160.0 (non-waste water) 36.0 (non-waste water) 33.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 0.75(non-waste water) INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water)
<input type="checkbox"/> Waste Antifreeze	D008, D039,	Lead Tetrachloroethylene	5.0 (non-waste water) Not Established

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

\*These treatment standards do not preclude reclamation prior to final disposition. 9318 5-127-01-8608 02 994589  
WARNER IMPLEMENT IAD022384200

Generator Company:

EPA ID NO.:

MANF DOC: 94589

Generator's Signature:

Date:

Printed Name and Title of Generator:



777 Big Timber Road  
Elgin, Illinois 60123

FOR SERVICE CALL  
TRANSPORTER

DUNS NO. 05106-0408      FED. ID NO. 39-6090019

SCHEDULED SERVICE WEEK	SCHEDULED SERVICE TERRITORY	REFERENCE NUMBER
93- 26	02	651027
MANIFEST NUMBER	51027	

5-127-01-8608-7

402-333-6321 COMPANY RUN  
LDR REQ'D 220-2200 61

WARNER IMPLEMENT  
BUS BROWN DRIVE  
BOX 12  
WOODSINE

IA 51579

B I L L T O

SERVICE DATE		SALESMAN'S NO.		SALES SPECIALIST		SALES TAX EXEMPTION NUMBER		HANDLING CODE		CREDIT CODE		PREVIOUS BALANCE		PORTION OVER 60 DAYS	
7-2-93		7031		XXXX						C		329.18			
BUSINESS TYPE	CHAIN	CUSTOMER P.O. NUMBER				GENERATOR/CUSTOMER PHONE #			O.C.	SVC P/S	PROD. P/S	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX	
08	NO	007				712-647-2702			NO	913	001	.05	.05	.05	

## MACHINE SERVICE SECTION

MACHINE NUMBER	SERVICE CHARGE	SALES TAX	TOTAL CHARGE	SERVICE TERM	CHANGE SERVICE TERM		CHANGE SCHEDULE DATE	REMARKS	PLEASE CHECK APPROPRIATE BOXES		
					(WEEKS)	(INITIAL)			GOOD	POOR	
141-26718	48.50	2.43	50.93	08					MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>
300-03043	83.00	4.15	87.15	08					LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>
303-77024	83.00	4.15	87.15	08						YES	NO
530-89487	99.00	4.95	103.95	08					DECALS IN PLACE AND LEGIBLE	<input type="checkbox"/>	<input type="checkbox"/>
									FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>
									EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>
									MACHINE PROPERLY GROUNDED	<input type="checkbox"/>	<input type="checkbox"/>
									LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
									SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL SERVICE SECTION	313.50	15.68	329.18	GENERATOR USA EPA ID NO.			GENERATOR STATE ID NO.				
				IAD022384200					16-210-9192		

## HAZARDOUS WASTE INFORMATION

"This is to certify that the below-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

I certify that my total waste streams are within one of the following categories:

CONTAINERS				USE DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	USEPA TRANSPORTER ID# 1LD051060408	the following categories.
SSPW TANKS IF	16 GAL. NO. DM	30 GAL. NO. DM	TOTAL LBS. OR GAL.			
1	1	3	55	Waste Combustible Liquid, N.O.S. (Mineral Spirits) NA1993 PGIII (EPA, D001, D018, D039) (ERG #27)	(IN GALLONS)	0 to 220 lbs./month Initial
				RQ Waste Compounds, Cleaning Liquid, (Monocethanolamine) 8, NA1760 PGIII (EPA, D006, D007, D008, D018, D021, D027, D039, D040) (ERG #60)	(IN GALS)	220 lbs. to 2,200 lbs./month Initial
						Greater than 2,200 lbs./month Initial

Total Quantity = Number of Drums x Ave. Wt/Drum of Pails

DESIGNATED FACILITY NAME AND ADDRESS: SAFETY-KLEEN CORP.

3515 SO 139TH ST

OMAHA

08P.	USA EPA ID NO.	NED981495724
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STATE ID NO.

## PRODUCT SALES SECTION

[illegible]

**PAYMENT RECEIVED SECTION**

<b>CASH</b> <input type="checkbox"/> <b>CHECK NUMBER</b>	<b>TOTAL RECEIVED</b>	<b>APPLY PAYMENT TO:</b>
		<input type="checkbox"/> <b>TODAYS SERVICE/SALE</b> <input type="checkbox"/> <b>PREVIOUS BALANCE AS FOLLOWS</b>
<b>INV. #</b> _____ <b>AMOUNT \$</b> _____ <b>INV. #</b> _____ <b>AMOUNT \$</b> _____ <b>INV. #</b> _____ <b>AMOUNT \$</b> _____		

### TOTAL PRODUCT AMOUNTS

CHARGE YOUR ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. ALSO I HAVE NOTED THE MACHINE INSPECTION SECTION ABOVE AND THE PRESENCE OF MACHINE SOLVENT AND RECLAMATION AGREEMENT INFORMATION ON THE REVERSE SIDE. THE ABOVE AMOUNT IS SUBJECT TO AN INTEREST CHARGE OF THE LESSOR OF 1/2% PER MONTH (8.9% PER ANNUUM) ON THE MINIMUM RATES ALLOWED BY LAW ON ANY UNPAID INVOICES THAT ARE NOT PAID WITHIN 30 DAYS.

**TOTAL SERVICE AMOUNT  
(FROM ABOVE)****TOTAL DUE**

IN THE EVENT OF DEFAULT, SAFETY-KLEEN SHALL BE ENTITLED TO RECOVER COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES.

Print  
Name \_\_\_\_\_

GENERATOR/DESIGNATED REPRESENTATIVE SIGNATURE

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

**IN EVENT OF EMERGENCY CALL  
1-708-888-4660 (24 hours)**

Information in the shaded areas  
is not required by Federal law.

1250-EE 200

1.  
Waste No.

6

G	
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[illegible]

--	--

K.	Handling Codes for Wastes Listed Above
----	--

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Date  
Month Day Year  
1 7 12 19

Date

Month Day Year

17293

Date \_\_\_\_\_

19. Discrepancy Indication Space

Line 12 & 13 a should read 1 container & 5 total quantity.  
Line 12 & 13 b should read 4 container & 50 total quantity.

Month Day Year

1/10/17-

SAFETY-KLEEN CORP.  
(DESIGNATED FACILITY)EPA ID NO. NED981495724  
(DESIGNATED FACILITY)

3515 SO 139TH ST

ADDRESS: OMAHA

NE 68144

## OPTION A

Under manifest number 51027, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

## OPTION B

SQG CUSTOMERS ONLY  
(PARTS WASHER AND  
IMMERSION CLEANER  
609 AND 699)

In accordance with 40 CFR 268.7, the generator hereby provides notice that the waste is restricted from land disposal. I am a small quantity generator (100-1,000 kg/mo) in accordance with 40 CFR 268.7. This notice applies to all waste shipments under my service contract with Safety-Kleen Corp. It covers today's shipment on manifest No. \_\_\_\_\_, or sales/service acknowledgement No. \_\_\_\_\_, and all subsequent shipments. A copy of this notice will be maintained with the service contract(s) or sales/service acknowledgment(s) for five (5) years beyond the termination of the service contract.

WASTE NAME	EPA * WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD (FOR NON-WASTE WATER)
<input checked="" type="checkbox"/> Waste Petroleum Naphtha (105)	D001, D018, D039,	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's) $\geq$ 1000 mg/l  Benzene Tetrachloroethylene	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water) INCIN (40 CFR 268.42) (non-waste water) Not Established Not Established
<input type="checkbox"/> Waste Petroleum Naphtha (140)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water)
<input type="checkbox"/> Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001, D006, D007, D008, D039,	All of the above, plus: — Cadmium — Chromium — Lead — Tetrachloroethylene	1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established
<input type="checkbox"/> Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006, D007, D008, D018, D021, D027, D039, D040,	HOC's $\geq$ 1000 mg/l — Cadmium — Chromium — Lead — Benzene — Chlorobenzene — 1, 4-Dichlorobenzene — Tetrachloroethylene — Trichloroethylene	INCIN (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established Not Established Not Established Not Established
<input type="checkbox"/> Waste Perchloroethylene	F002,	Tetrachloroethylene	5.6 (non-waste water)
<input type="checkbox"/> Waste Perc. Filters This hazardous debris is subject to the alternative treatment standards of 40CFR 268.45.	F002,	Tetrachloroethylene	5.6 (non-waste water)
<input type="checkbox"/> Waste Trichlorotrifluoroethane	F002,	Trichlorotrifluoroethane	28.0 (non-waste water)
<input type="checkbox"/> Waste 1,1,1 Trichloroethane	F002,	1, 1, 1 Trichloroethane	5.6 (non-waste water)
<input type="checkbox"/> Waste Petroleum Naphtha (Dry Cleaning)	D001, D039,	Ignitable Liquid (High TOC Subcategory) Tetrachloroethylene	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) Not Established
<input type="checkbox"/> Waste Paint Related Material	F003, F005, F003, F005, F003, F003, D001, D006, D007, D008,	Acetone Methyl Ethyl Ketone Methyl Isobutyl Ketone Toluene Xylene Methanol Ignitable Liquid (High TOC Subcategory) Cadmium Chromium Lead (TOC Subcategory)	160.0 (non-waste water) 36.0 (non-waste water) 33.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 0.75 (non-waste water) INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water)
<input type="checkbox"/> Waste Antifreeze	D008, D039,	Lead Tetrachloroethylene	5.0 (non-waste water) Not Established

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

\*These treatment standards do not preclude reclamation prior to final disposition.

9326 5-127-01-8608 02 651027  
IAD022384200Generator Company: WARNER IMPLEMENT

EPA ID NO.:

MANF DOC: 51027

Generator's Signature: X Paul TheulenDate: 7-1-93Printed Name and Title of Generator: PAUL THEULEN

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restrictions.



1000 Randall Road  
Elgin, Illinois 60123



FOR SERVICE CALL  
TRANSPORTER

DUNS NO. 05108-0408      FED. ID NO. 39-6090019

SCHEDULED SERVICE WEEK	SCHEDULED SERVICE TERRITORY	REFERENCE NUMBER
93- 34	02	335054
MANIFEST NUMBER	35054	

402-333-6321 JOHN AWALT  
LDR REQ'D 220-2200 61

1A 51579

5-127-01-8608-7  
WARNER IMPLEMENT  
BUS BROWN DRIVE  
BOX 12  
WOODBINE

SERVICE DATE		SALESMAN'S NO.		SALES SPECIALIST		SALES TAX EXEMPTION NUMBER		HANDLING CODE		CREDIT CODE		PREVIOUS BALANCE		PORTION OVER 60 DAYS		
8-27-93		7031		XXXX								329.18				
BUSINESS TYPE	CHAIN	CUSTOMER P.O. NUMBER				GENERATOR/CUSTOMER PHONE #		O.C.		SVC P/S	PROD. P/S	SERVICE TAX		C.O.M.S. TAX		PRODUCT TAX
08	NO	007				712-6643-2702		A/C		81	005	005		005		005

MACHINE SERVICE SECTION										MACHINE INSPECTION SECTION	
MACHINE NUMBER	SERVICE CHARGE	SALES TAX	TOTAL CHARGE	SERVICE TERM	CHANGE SERVICE TERM (WEEKS) (INITIAL)		CHANGE SCHEDULE DATE (YY WW)	REMARKS	PLEASE CHECK APPROPRIATE BOXES		
									GOOD	POOR	
141-26718	48.50	2.43	50.93	08				0062	MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>
300-03043	43.00	4.15	47.15	08				SVC'D ON 11/11/11	LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>
303-77024	83.00	4.15	87.15	08				WE 31 # 0114747		<input type="checkbox"/>	<input type="checkbox"/>
530-89487	99.00	4.90	103.90	08					YES	NO	
									DECALS IN PLACE AND LEGIBLE	<input type="checkbox"/>	<input type="checkbox"/>
									FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>
									EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>
									MACHINE PROPERLY GROUNDED	<input type="checkbox"/>	<input type="checkbox"/>
									LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
									SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TOTAL SERVICE SECTION	234.50	11.53	242.03	GENERATOR USA EPA ID NO.			GENERATOR STATE ID NO.				
	213.50	10.15	223.65	540023356 200					16-210-0152		

HAZARDOUS WASTE INFORMATION:					<small>"This is to certify that the below-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."</small>		<small>I certify that my total waste streams are within one of the following categories:</small>	
CONTAINERS				US DOT DESCRIPTION <small>(INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)</small>	USEPA TRANSPORTER ID# JLD051060408	<small>0 to 220 lbs./month</small>	<small>220 lbs. to 2,200 lbs./month</small>	<small>Greater than 2,200 lbs./month</small>
SSPW TANKS DF	16 GAL. NO. DM	30 GAL. NO. DM	TOTAL LBS. OR GAL.					
1	1		13	Waste Combustible Liquid, N.O.S. (Petroleum Naphtha) NA1993 PGIII (EPA, D001, D018, D039) (ERG #27)	16 GAL. DRUMS			
		2	29	RQ Waste Combustible Liquid, N.O.S. (Petroleum Naphtha) NA 1993 PGIII (EPA, D001, D018, D039) (ERG #27)	30 GAL. DRUMS			
				RQ Waste Compounds, Cleaning Liquid, (Monoethanolamine) 8, NA1760 PGIII (EPA, D008, D007, D008, D018, D021, D027, D039, D040) (ERG #60)	PRODUCT NO. 699			

DESIGNATED FACILITY NAME AND ADDRESS:		USA EPA ID NO.
SAFETY-KLEEN CORP.		NED981495724
3515 SO 139TH ST		STATE ID NO.
OMAHA NE 68144		

[illegible]

PAYMENT RECEIVED SECTION		
CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INV. # _____ AMOUNT \$ _____ INV. # _____ AMOUNT \$ _____ INV. # _____ AMOUNT \$ _____		

<b>TOTAL PRODUCT AMOUNTS</b>				
CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION, THE RECLAMATION AGREEMENT, ADDITIONAL TERMS AND CONDITIONS, AND OTHER INFORMATION APPEARING ON THE REVERSE SIDE ARE MADE A PART HEREOF. THE ABOVE AMOUNT IS SUBJECT TO AN INTEREST CHARGE OF THE LESSOR OF 1½% PER MONTH (18% PER ANNUM) OR THE MAXIMUM RATE ALLOWED BY LAW ON ANY UNPAID INVOICES THAT ARE NOT PAID WITHIN 30 DAYS.		<b>TOTAL SERVICE AMOUNT (FROM ABOVE)</b>		242.03
		<b>TOTAL DUE</b>		242.03
		IN THE EVENT OF DEFAULT, SAFETY-KLEEN SHALL BE ENTITLED TO RECOVER COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES.		
X <u>MARC MEYER</u> GENERATOR/DESIGNATED REPRESENTATIVE SIGNATURE		Print Name <u>MARC MEYER</u>		

**IN EVENT OF EMERGENCY CALL  
1-708-888-4660 (24 hours)**

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. IL0 984906202		Manifest Document No. 38034		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address WARNER IMPLEMENT BOX 12 WOODBINE 500 BELLA DRIVE SA 3177						A. State Manifest Document Number									
4. Generator's Phone (712) 447-2702						B. State Generator's ID									
5. Transporter 1 Company Name SAFETY-KLEEN CORP.			6. US EPA ID Number IL0 984906202			C. State Transporter's ID									
7. Transporter 2 Company Name			8. US EPA ID Number			D. Transporter's Phone 402 333-6321									
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 3515 SO 139TH ST OMAHA NE 68144			10. US EPA ID Number 5-127-01			E. State Transporter's ID									
						F. Transporter's Phone									
						G. State Facility's ID									
						H. Facility's Phone 402 333-6321									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. X WASTE COMBUSTIBLE LIQUID, N.C.S. (PETROLEUM NAPHTHA) NA1993 PGIII (0001) (ERG27) 6.7 LBS/GAL						1 No.		5		G		D001 D039			
b. X WASTE COMBUSTIBLE LIQUID, N.C.S. (PETROLEUM NAPHTHA) NA1993 PGIII (0001) (ERG27) 6.7 LBS/GAL						3 No.		37		G		D001 D039			
c.															
d.															
J. Additional Descriptions for Materials Listed Above I(A) D018 I(B) D018						K. Handling Codes for Wastes Listed Above									
15. Special Handling Instructions and Additional Information IF UNDELIVERABLE, RETURN TO GENERATOR FOR RECYCLE EMERGENCY RESPONSE 708-888-4666 24HR. CNDOTE A: 501 B: 563 C: D:															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name MARC MEYER						Signature Marc Meyer						Date Month Day Year 8 27 93			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name Eugene Rausch						Signature Eugene Rausch		Date Month Day Year 8 27 93	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name						Signature		Date Month Day Year	
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name Tricia Brewer						Signature Tricia Brewer						Date Month Day Year 8 30 93			



TO:

SAFETY-KLEEN CORP.  
(DESIGNATED FACILITY)EPA ID NO. NED981495724  
(DESIGNATED FACILITY)

3515 SO 139TH ST

ADDRESS: OMAHA

NE 68144

Under manifest number 35054, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

✓	WASTE NAME	EPA * WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD (FOR NON-WASTE WATER)
PLEASE CHECK THE APPROPRIATE BOXES	<input checked="" type="checkbox"/> Waste Petroleum Naphtha (105)	D001,  D018, D039,	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's) $\geq$ 1000 mg/l  Benzene Tetrachloroethylene	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGs) (40 CFR 268.42) (non-waste water) INCIN (40 CFR 268.42) (non-waste water) Not Established Not Established
	<input type="checkbox"/> Waste Petroleum Naphtha (140)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGs (40 CFR 268.42) (non-waste water)
	<input type="checkbox"/> Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001, D006, D007, D008, D039,	All of the above, plus: — Cadmium — Chromium — Lead — Tetrachloroethylene	1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established
	<input type="checkbox"/> Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006, D007, D008, D018, D021, D027, D039, D040,	HOC's $\geq$ 1000 mg/l — Cadmium — Chromium — Lead — Benzene — Chlorobenzene — 1, 4-Dichlorobenzene — Tetrachloroethylene — Trichloroethylene	INCIN (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water) Not Established Not Established Not Established Not Established Not Established
	<input type="checkbox"/> Waste Perchloroethylene	F002,	Tetrachloroethylene	5.6 (non-waste water)
	<input type="checkbox"/> Waste Perc. Filters This hazardous debris is subject to the alternative treatment standards of 40CFR 268.45.	F002,	Tetrachloroethylene	5.6 (non-waste water)
	<input type="checkbox"/> Waste Trichlorotrifluoroethane	F002,	Trichlorotrifluoroethane	28.0 (non-waste water)
	<input type="checkbox"/> Waste 1,1,1 Trichloroethane	F002,	1, 1, 1 Trichloroethane	5.6 (non-waste water)
	<input type="checkbox"/> Waste Petroleum Naphtha (Dry Cleaning)	D001, D039,	Ignitable Liquid (High TOC Subcategory) Tetrachloroethylene	INCIN, FSUBS, or RORGs (40 CFR 268.42) (non-waste water) Not Established
	<input type="checkbox"/> Waste Paint Related Material	F003, F005, F003, F005, F003, F003, F003, D001, D006, D007, D008,	Acetone Methyl Ethyl Ketone Methyl Isobutyl Ketone Toluene Xylene Methanol Ignitable Liquid (High TOC Subcategory) Cadmium Chromium Lead (TOC Subcategory)	160.0 (non-waste water) 36.0 (non-waste water) 33.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 0.75 (non-waste water) INCIN, FSUBS, or RORGs (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water)
	<input type="checkbox"/> Waste Antifreeze	D008, D039,	Lead Tetrachloroethylene	5.0 (non-waste water) Not Established

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

\* These treatment standards do not preclude reclamation prior to final disposition.

WARNER IMPLEMENT

9334

5-127-01-8608

02

335054

EPA ID NO.: IAD022384200

Generator Company:

MANF DOC: 35054

Generator's Signature

X Marc Meyer

Date:

8-27-93

Printed Name and Title of Generator:

MARL MEYER

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restrictions.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. IAD 022384200		Manifest Document No. 59518		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address WARNER IMPLEMENT BOX 12 WOODBINE BUS BROWN DRIVE IA 51579						A. State Manifest Document Number									
4. Generator's Phone ( 712 ) 647-2702						B. State Generator's ID									
5. Transporter 1 Company Name SAFETY-KLEEN CORP.			6. US EPA ID Number IAD 084908202			C. State Transporter's ID									
7. Transporter 2 Company Name			8. US EPA ID Number			D. Transporter's Phone 402 333-6321									
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 3515 SC 135TH ST OMAHA NE 68144			10. US EPA ID Number 5-127-01 NEO 981495724			E. State Transporter's ID									
						F. Transporter's Phone									
						G. State Facility's ID									
						H. Facility's Phone 402 333-6321									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. X WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (ERG#27) 6.7 LBS./GAL						1 DF		5		G		D001 D039			
b. X RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (ERG#27) 6.7 LBS./GAL						4 DM		53		G		D001 D039			
c.															
d.															
J. Additional Descriptions for Materials Listed Above I(A) D018 I(B) D018						K. Handling Codes for Wastes Listed Above									
15. Special Handling Instructions and Additional information 9342 60378247 959518 5-127-01-8608 02 IF UNDELIVERABLE, RETURN TO GENERATOR FOR RECYCLE EMERGENCY RESPONSE#708-888-4660 24HR. SK00T# A: 501 B: 585 C: D:															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name CHUCK WARNER						Signature [Signature]						Date Month Day Year 10/18/93			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name Eugene Rausel						Signature [Signature]		Date Month Day Year 10/18/93	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name						Signature		Date Month Day Year	
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name Tricia Brewer						Signature [Signature]		Date Month Day Year 10/19/93	



**RCRIS HANDLER INFORMATION**

This form completed on 07/19/94 (date) by J. Cull (name of person completing form)  
PRC-EMI (name of person's employer), FES REPA Contractor.

Instructions for completing form: Completion of all items in **BOLDFACE** is **REQUIRED**; completion of other items is optional, subject to the availability of the information.

**EPA RCRA ID NUMBER:** **IA** IAD022384200  
WARNER IMPLEMENT INC

**1. NAME OF INSTALLATION** BUS BROWN DR  
WOODBINE-IA-51579

**2. LOCATION OF INSTALLATION** (PHYSICAL ADDRESS, NOT PO BOX OR RURAL ROUTE NUMBER; ADDRESS MUST BE SPECIFIC; IF NECESSARY, INCLUDE DIRECTIONS ON HOW TO FIND THE INSTALLATION)

- EXAMPLES OF UNACCEPTABLE INSTALLATION ADDRESSES ARE: "Box 47," "RR #3," "Curtis Ave," "Hwy 49 West"

- EXAMPLES OF ACCEPTABLE ADDRESSES ARE: "123 Main St," "1 mile west of Hwy 6 on County Road EE," "J 12," "NW corner of Jackson and Jefferson Streets"

**STREET ADDRESS:** 72 BUS BROWN DR.

**CITY/ZIP CODE:** WOODBINE, **IA** 51579

**3. INSTALLATION MAILING ADDRESS** (IF SAME AS LOCATION ADDRESS, WRITE "SAME"):

**STREET ADDRESS:** RR2 Box B

**CITY/ZIP CODE:** Woodbine, **IA** 51579

**4. INSTALLATION CONTACT PERSON:**

Name: Gary Warner

Title: ~~Secretary~~ Vice President

Telephone Number: Area Code (712) 647-2702

Street Address: SAME

City/Zip Code: \_\_\_\_\_, **IA** \_\_\_\_\_

**5. OWNERSHIP INFORMATION:**

Name of Installation's Legal Owner: Warner Implement Inc

Street Address: SAME

City/Zip Code: \_\_\_\_\_, **IA** \_\_\_\_\_

Telephone Number: Area Code (712) 647-2702

**6. RCRA REGULATED ACTIVITY APPARENTLY BEING CONDUCTED AT SITE (CHECK ALL THAT APPLY)**

☒ Hazardous waste generation ☐ Hazardous waste transportation

☐ Conditionally exempt small quantity generator

☐ Transports waste for self only

☒ Small quantity generator

☐ Transports waste for hire

☐ Large quantity generator

☐ Other: (specify) \_\_\_\_\_

RCRIS data entered  
BY PCO/ANRP/SEE  
ON 4/24/97

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
CONFIDENTIALITY NOTICE

Facility Name <b>WARNER Implement INC.</b>	
Facility Address <b>72 BUS BROWN DR. Woodbine, IA</b>	
Inspector (print) <b>J. Cull</b>	Title <b>PRC-EMI</b>
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	
Date <b>07/19/94</b>	

It is possible that the United States Environmental Protection Agency (EPA) will receive public requests for release of the information obtained during inspection of the facility above. Such requests will be handled by EPA in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. EPA is required to make inspection data available in response to FOIA requests, unless the Agency determines that the data contains information entitled to confidential treatment.

Any or all of the information collected by EPA during the inspection may be claimed confidential, if it relates to trade secrets or commercial or financial matters that you consider to be confidential. If you make claims of confidentiality, EPA will disclose the information only to the extent, and by the means of the procedures set forth in the regulations (cited above) governing EPA's treatment of confidential information.

To claim information confidential, you must certify that each claimed item meets all of the following criteria (40 CFR 2.208):

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to your company's competitive position.

In addition, within fifteen (15) calendar days of the claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). This statement should be mailed by registered, return-receipt requested mail to the Inspector at the address listed above. Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

At the completion of the inspection, you will be given a receipt for all materials collected. At that time you may make claims that some or all of the information is confidential and meets the criteria listed above.



U.S.EPA INSPECTION CONFIDENTIALITY NOTICE (cont.)

Facility Name	
Warner Implement Inc.	
Facility Address	
72 BUS BROWN DR.	Woodbine, IA

If you are not authorized by your company and there is no one on the premises of the facility who is authorized to make confidentiality claims, this notice will be sent by certified mail, along with the receipt for documents, samples, and other materials, to the authorized representative designated below.

Authorized Representative \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

If the authorized representative listed above requests confidential treatment, they must return a statement specifying any information which should receive confidential treatment and written comments in support of the claim based on factors listed in 40 CFR 2.204(e)(4).

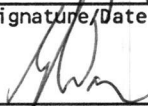
This statement from the authorized representative should be mailed by registered, return-receipt requested mail within fifteen (15) calendar days of receipt of the Confidentiality Notice to the Inspector at the address listed on page 1.

Failure to submit confidentiality claims and comments within the fifteen (15) day period will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

=====

To be completed by the facility official receiving this Notice:

I have received and read this Notice.

Facility Representative Provided Notice (print)	Title
Gary Warner	Vice President
Signature/Date	
	2/19/94

(rev:1/20/93)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REQUEST FOR CONFIDENTIAL TREATMENT

Facility Name	Warner Implement INC.
Facility Address	72 BUS BROWN DR. Woodbine, IA

Information for which confidential treatment is requested:

plane

Acknowledgement of Claimant

The undersigned requests that confidential treatment of the information described be provided in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. The undersigned further acknowledges that they are authorized to make such claims for their firm.

The undersigned also certifies that each claimed item described above meets all of the following criteria (40 CFR 2.208):

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing of special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to your company's competitive position.

In addition, within 15 days of your claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

Authorized Representative (print)	Signature/Date
Gary Warner	[Signature] 7/19/94
No confidential treatment claimed during the inspection: [Signature] (Facility Representative's initials)	
Inspector (print)	Signature/Date
J. Cull	Jam Cull 07/19/94
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
RECEIPT FOR DOCUMENTS AND SAMPLES

Facility Name <b>Warner Implement INC.</b>
Facility Address <b>72 BUS BROWN DR. Woodbine, IA</b>

Documents Collected? YES\_\_\_ (list below) NO X

Samples Collected? YES\_\_\_ (list below) NO X Split Samples: YES\_\_\_ NO\_\_\_

Documents/Samples were: 1)Received no charge\_\_\_ 2)Borrowed\_\_\_ 3)Purchased\_\_\_

Amount Paid: \$\_\_\_ Method: Cash\_\_\_ Voucher\_\_\_ To Be Billed\_\_\_

The documents and samples described below were collected in connection with the administration and enforcement of the applicable statute under which the information is obtained.

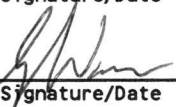
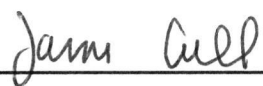
=====

Receipt for the document(s) and/or sample(s) described below is hereby acknowledged:

Will send 1993 manifests (after July 1993) to:

Martha Rodke  
PRC EM1  
650 MINNESOTA AVE  
Kansas City, KS 66101

(files before July 1993 destroyed in flood)

Facility Representative (print) <b>Gary Warner</b>	Signature/Date  7/15/94
Inspector (print) <b>J. Cull</b>	Signature/Date  07/19/94
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	

## RCRIS HANDLER INFORMATION REPORT

May 17, 1994

The information summarized below has been entered into EPA's RCRA Computer Data Base for the INSTALLATION LOCATION AND EPA RCRA Identification Number listed. If any of this information is inaccurate, you may notify us of the change(s) by writing to us, telephoning us, or by completing a Notification of Regulated Waste Activity Form (EPA Form 8700-12), a copy of which is attached, or simply marking any changes on this report and sending it to EPA at:

EPA REGION 7 - RCRA/IOWA  
726 MINNESOTA AVENUE  
KANSAS CITY, KANSAS 66101

Your cooperation in helping us to maintain accurate records is appreciated. If you have any questions, please call our Iowa RCRA Hazardous Waste Inquiry Helpline number (913) 551-7861, and leave a message. Someone will get back to you as soon as possible.

EPA RCRA ID Number: IAD022384200

Name of Company/Installation: WARNER IMPLEMENT INC  
Location of Installation: BUS BROWN DR  
City/State/Zip: WOODBINE, IA 51579  
County: HARRISON

Mailing Address: BUS BROWN DR  
City/State/Zip: WOODBINE, IA 51579

Installation Contact: GARY WARNER  
Job Title: SECRETARY  
Phone Number: (712) 647-2702  
Contact's Address: BUS BROWN DR  
City/State/Zip: WOODBINE, IA 51579

Current Owner of Installation: WARNER IMPLEMENT CO  
Owner's Address: Same

Phone Number: ( ) - -

Land Type: \_\_\_\_\_  
Owner Type: Private

Type(s) of Regulated Activity: SMALL QUANTITY GENERATOR

Hazardous Wastes Handled: D000, D001, F002, F004

[Signature]  
Signature

Gary Warner Vice President  
Name and Official Title

7/15/94  
Date Signed

All information you submit in a notification can be released to the public, according to the Freedom of Information Act, unless it is determined to be confidential by U.S. EPA pursuant to 40 CFR Part 2. Since notification information is very general, the U.S. EPA believes it is unlikely that any information in your notification could qualify to be protected from release. However, you may make a claim of confidentiality by printing the word "CONFIDENTIAL" on both sides of the Notification Form and on any attachments or submittals including this information report. EPA will take action on the confidentiality claims in accordance with 40 CFR Part 2.

RCRIS data entered  
BY PCP/AARP/SEE  
ON 4/24/97